

IAP11 Rec'd PCT/PTO 14 JUL 2006

APPLICATION DATA SHEET

Application Information	
Application Number::	
Filing Date::	Herewith
Application Type::	Regular
Subject Matter::	Utility
Suggested Classification::	
Suggested Group Art Unit::	
CD-ROM or CD-R::	None
Number of CD disks::	
Number of Copies of CDs::	
Sequence Submission?::	Yes
Computer Readable Form (CRF)?::	Yes
Number of Copies of CRF::	1
Title::	Methods and Compositions for Modulating a Steroid Receptor
Attorney Docket Number::	MTS6USA
Request for Early Publication?	No
Request for Non-Publication?	No
Suggested Drawing Figure::	
Total Drawing Sheets::	13
Small Entity::	No
Petition Included::	No
Petition Type	
Licensed US Govt. Agency::	
Contract or Grant Number::	
Secrecy Order in Parent Application::	

Applicant Information	
Applicant Authority Type::	Inventor
Primary Citizenship Country::	Great Britain
Status::	Full Capacity
Given Name::	Stephen
Middle Name::	
Family Name::	Lye
Name Suffix::	
City of Residence::	Toronto
State or Province of Residence::	ONT
Country of Residence::	Canada
Street of Mailing Address::	305 Dawlish Road
City of Mailing Address::	Toronto
State or Province of Mailing Address::	ONT
Country of Mailing Address::	Canada
Postal or Zip Code of Mailing Address::	M4N 1J6

Applicant Information	
Applicant Authority Type::	Inventor
Primary Citizenship Country::	China
Status::	Full Capacity
Given Name::	Xuesen
Middle Name::	
Family Name::	Dong
Name Suffix::	
City of Residence::	Aurora
State or Province of Residence::	ONT
Country of Residence::	Canada
Street of Mailing Address::	36 Perivale Gardens
City of Mailing Address::	Aurora
State or Province of Mailing Address::	ONT
Country of Mailing Address::	Canada
Postal or Zip Code of Mailing Address::	L4G 7P6

Correspondence Information	
Correspondence Customer Number::	00270
Name::	Howson and Howson
Street of Mailing Address	501 Office Center Drive, Suite 210
City of Mailing Address	Fort Washington
State or Province of Mailing Address	Pennsylvania
Country of Mailing Address	US
Postal or Zip Code of Mailing Address::	19034
Phone Number::	215-540-9200
Fax Number::	215-540-5818
E-Mail Address::	mebak@howsonandhowson.com

Representative Information		
Representative Customer No. 00270	Registration Number	Name

Domestic Priority Information			
Application	Continuity Type	Parent Application	Parent Filing Date
This Application	National Phase of	PCT/CA2005/000042	01/14/05
PCT/CA2005/000042	An application claiming the benefit under 119(e) of	60/536,598	01/15/04

Assignee Information	
Assignee Name::	Mount Sinai Hospital
Street of Mailing Address::	600 University Avenue
City of Mailing Address::	Toronto
State or Province of Mailing Address::	ONT
Country of Mailing Address::	Canada
Postal or Zip Code of Mailing Address::	M5G 1X5